

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND										
1 Date of Request: <u>4/30/02</u>		2 Serial/Patent # <u>09/348,320</u>								
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT						
	Filing			\$						
	Amendment			\$						
	Extension of Time			\$						
	Notice of Appeal/Appeal			\$						
	Petition			\$						
	Issue			\$						
	Cert of Correction/Terminal Disc.			\$						
	Maintenance			\$						
<input checked="" type="checkbox"/>	Assignment	—	2/19/02	\$ 40						
	Other			\$						
			7 TOTAL AMOUNT OF REFUND	\$ 40						
8 TO BE REFUNDED BY:										
10 REASON:		Treasury Check								
<input checked="" type="checkbox"/>	Overpayment	<input checked="" type="checkbox"/>	Credit Deposit A/C #:							
	Duplicate Payment	9 <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">0</td> <td style="width: 20px;">8</td> <td style="width: 20px;">--</td> <td style="width: 20px;">1</td> <td style="width: 20px;">3</td> <td style="width: 20px;">10</td> </tr> </table>			0	8	--	1	3	10
0	8	--	1	3	10					
	No Fee Due (Explanation):									
<p style="font-size: 1.2em; margin: 0;">should have been \$40; pd \$80</p>										
11 REFUND REQUESTED BY: <u>[Signature]</u>										
TYPED/PRINTED NAME:		TITLE: <u>Petitioner Att</u>								
SIGNATURE: <u>[Signature]</u>		PHONE: <u>703 308-0763</u>								
OFFICE: <u>Petitioner</u>										
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****										
APPROVED: <u>[Signature]</u>		DATE: <u>5-1-02</u>								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: